ARIZONA CORPORATION COMMISSION UTILITIES DIVISION RECEIVED

JUN 07 2004

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESCOR COMMISSION DIRECTOR OF HTHIRD COMMISSION OF THE COMMISSI

6-04015 A
Shalans Water Company
PO 20x 10450
CASA GRAND2 Az 85230

ANNUAL REPORT

FOR YEAR ENDING

12 31 2003

FOR COMMISSION USE
ANN04 03

COMPANY INFORMATION

Company Name (Business Name)	SWALAND WATER	COMPAN!
	× 10450) (
ASA GNANDEZ (City)	<u></u>	85270
	(State)	(Zip)
520 466-5804 Telephone No. (Include Area Code)	520 466-9425	520 251-0628
Email Address	Fax No. (Include Area Code)	Pager/Ceil No. (Include Area Code)
Local Office Mailing Address	0 Box 10450	
	Street)	
(City)		<u> 85230</u> (Zip)
• • •	(State)	(Z1p)
Show Hold State (Include Area Code)	520 466-9425	520 251-0628
	Tax 110. (include Alea Code)	Pager/Cell No. (Include Area Code)
Email Address		•
	AGEMENT INFORMATIO	<u>ON</u>
Management Contact:	Name)	MANACET (Title)
POBOX 10450	CASA GASANS	AZ 85230
(Street)	CHSA GRANDZ (City)	(State) (Zip)
520 466-5804		520 251-0628
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)
Email Address		
11001000		
	MILLER	
On Site Manager:	(Name)	()
	(Name) (ASA GRANGE	Az 85230
On Site Manager: BELL POBOX 10450 (Street)	(Name) (RSAGRANDE (City)	(State) (Zip)
On Site Manager: BELL	(Name) (ASA GRANGE	(State) (Zip)
On Site Manager: BEN POROX 10450 (Street) 520 466-5804 Telephone No. (Include Area Code)	(Name) (RSAGRANDE (City)	
On Site Manager: BEI	(Name) (RSAGRANDE (City)	(State) (Zip)

Please mark this box if the above address(es) have changed or are updated since the last filing.

Statutory Agent:				
	(Name)	•		
(Street)	(City)	(State)	(Zip)	
Telephone No. (Include Area Code)	Fax No. (Include Area Code	Pager/Cell No.	(Include Area Code)	
Attorney: 54 splan Coop	(Name)	100 ber 4 No	tsquaz hhP	
•	254 CANDES CRANDES	State)	<u> </u>	
Telephone No. (Include Area Code)	520 421-0916 Fax No. (Include Area Code)	Pager/Cell No. (Include Area Code)	
☐ Please mark this box if the above	e address(es) have changed or are	updated since the	e last filing.	
<u>o</u>	WNERSHIP INFORMATION	<u>ON</u>		
Check the following box that applies t	o your company:			
☐ Sole Proprietor (S) ☐ C Corporation (C) (Other than Association/Co-op)				
Partnership (P)	☐ Subchapter S Co	rporation (Z)		
☐ Bankruptcy (B)	Association/Co-o	p (A)		
Receivership (R)		Company		
Other (Describe)				
	COUNTIES SERVED			
Check the box below for the county/ie	es in which you are certificated to p	rovide service:		
Д АРАСНЕ	☐ COCHISE	□ coc	ONINO	
☐ GILA	☐ GRAHAM	GRE	ENLEE	
☐ LA PAZ	☐ MARICOPA	□ мон	IAVE	
☐ NAVAJO	☐ PIMA		L	
☐ SANTA CRUZ	☐ YAVAPAI	☐ YUM	ΙA	
☐ STATEWIDE				

UTILITY PLANT IN SERVICE

Acct.		Original	Accumulated	O.C.L.D.
No.	DESCRIPTION	Cost (OC)	Depreciation (AD)	(OC less AD)
301	Organization			
302	Franchises	3000	500	2500
303	Land and Land Rights	2000		2000
304	Structures and Improvements	10000	1667	8333
307	Wells and Springs	17000	2833	14167
311	Pumping Equipment	5000	833	4167
320	Water Treatment Equipment			•
330	Distribution Reservoirs and Standpipes			•
331	Transmission and Distribution Mains	20000	3333	16667
333	Services			
334	Meters and Meter Installations	3000	500	2500
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
~	TOTALS	60000	9666	50334

This amount goes on the Balance Sheet Acct. No. 108-

CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
301	Organization			
302	Franchises	3000	.05	150
303	Land and Land Rights	2000		
304	Structures and Improvements	10000	105	500
307	Wells and Springs	17000	,05	9 <i>5</i> 0
311	Pumping Equipment	5000		250
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains	20000	,05	1000
333	Services			
334	Meters and Meter Installations	3000	,05	150
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	TOTALS	60000		, 2900

This amount goes on the Comparative Statement of Income and Expense _ Acct. No. 403.

BALANCE SHEET

Acct		BALANCE AT BEGINNING OF	BALANCE AT END OF
	ASSETS	YEAR	YEAR
	CURRENT AND ACCRUED ASSETS		(0)5.11
131	Cash	\$ 264	\$ < 2347
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable		1342
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	TOTAL CURRENT AND ACCRUED ASSETS	\$ 264	\$ 1108
		\$ 264	1 100
	FIXED ASSETS		4
101	Utility Plant in Service	\$ 60000	\$ 60000
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation - Utility Plant	6766	9666
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility	•	
	TOTAL FIXED ASSETS	\$ 53234	\$ 50334
			0 () ()
	TOTAL ASSETS	\$ 53498	\$ 51442

NOTE: The Assets on this page should be equal to Total Liabilities and Capital on the following page.

BALANCE SHEET (CONTINUED)

Acct. No.		BALANCE AT BEGINNING OF	BALANCE AT END OF
	LIABILITIES	YEAR	YEAR
	CURRENT LIABILITES		
231	Accounts Payable	\$	\$ 266
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	TOTAL CURRENT LIABILITIES	\$	\$
	LONG-TERM DEBT (Over 12 Months)		
224	Long-Term Notes and Bonds	\$	\$
	Dong Term Notes and Donas		-
	DEFERRED CREDITS		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	TOTAL DEFERRED CREDITS	\$	\$
	TOTAL LIABILITIES	\$	\$
	CAPITAL ACCOUNTS	·	
201	Common Stock Issued	\$	\$
201 211	Paid in Capital in Excess of Par Value		
215	Retained Earnings		
213	Proprietary Capital (Sole Props and Partnerships)	53498	51176
210	TOTAL CAPITAL	\$ 53498	\$ 31176
			0 - 1111-
	TOTAL LIABILITIES AND CAPITAL	\$ 53498	\$ 5/442

COMPARATIVE STATEMENT OF INCOME AND EXPENSE

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue	\$ 5458	\$ 6912
460	Unmetered Water Revenue		1 2 1 2
474	Other Water Revenues		
	TOTAL REVENUES	\$ 5458	\$ 6912
	OPERATING EXPENSES		1
601	Salaries and Wages	-is	\$
610	Purchased Water		
615	Purchased Power	1311	1843
618	Chemicals	284	10.12
620	Repairs and Maintenance		409
621	Office Supplies and Expense	203	1080
630	Outside Services	2032	2289
635	Water Testing	70	439
641	Rents		•
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense	2365	8
403	Depreciation Expense	2900	2900
408	Taxes Other Than Income	215	,
408.11	Property Taxes		
409	Income Tax		·
	TOTAL OPERATING EXPENSES	\$ ৭১৪০	\$ 8968
	OPERATING INCOME/(LOSS)	\$ (3922)	\$ < 20567
	OTHER INCOME/(EXPENSE)		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	TOTAL OTHER INCOME/(EXPENSE)	\$	\$
	NET INCOME/(LOSS)	\$ (39227	\$ < 20567

CON	IPA	NY	NA	ME
-----	------------	----	----	----

SUPPLEMENTAL FINANCIAL DATA Long-Term Debt

	LOAN #1	LOA	N #2 LO	AN #3	LOAN #4
Date Issued					
Source of Loan					
ACC Decision No.					
Reason for Loan				•	
Dollar Amount Issued	\$	\$	\$	\$	
Amount Outstanding	\$	\$	\$	\$	
Date of Maturity					
Interest Rate		%	%	%	• %
Current Year Interest	\$	\$	\$	\$	
Current Year Principle	\$	\$	\$	\$	

Meter Deposit Balance at Test Year End	\$
Meter Deposits Refunded During the Test Year	\$

COM	[PA	NY	NA	ME

Sualans Natar Company

WATER COMPANY PLANT DESCRIPTION

WELLS

ADWR ID Number*	Pump Horsepower	Pump Yield (gpm)	Casing Depth (Feet)	Casing Diameter (Inches)	Meter Size (inches)	Year Drilled
56-001354-0000	20	100		20	2.5	
					`	
* Arizona Departmen	at of Water Because	es Identification Num				

Arizona Department of Water Resources Identification Number

OTHER WATER SOURCES

Name or Description	Capacity (gpm)	Gallons Purchased or Obtained (in thousands)

BOOSTER PUMPS		FIRE HYDRANTS	
Horsepower Quantity		Quantity Standard	Quantity Other
7.5	2		
			The state of the s

STORAGE TANKS		PRESSURE TANKS	
Capacity	Quantity	Capacity	Quantity
Dinno Gals	2	5,000 GAIS	\
,			
<u>.</u>			

CO	MP	ΔN	V	V A	ME
CO	TATE V	ALI Y	1 1	YΑ	TATE!

SUNJAND WATER COMPANY

WATER COMPANY PLANT DESCRIPTION (CONTINUED)

MAINS

Size (in inches)	Material	Length (in feet)
2		
3		
4	60C	26640
5		
6		
8		
10		
12		

CUSTOMER METERS

COSTOMER METERS				
Quantity				
53				

For the following three items, list the utility owned assets in each category.			
TREATMENT EQUIPMENT:			
STRUCTURES:			
OTHER:			

WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2003

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD	GALLON PUMPED (Thousands)
JANUARY	52	179684	189648
FEBRUARY	52	196944	201220
MARCH	53	213850	221640
APRIL	33	247261	253890
MAY	35	314967	325410
JUNE	56	468263	487591
JULY	56	5150456	547230
AUGUST	56	521370	55/6/0
SEPTEMBER	57	436330	457569
OCTOBER	57	408264	442569
NOVEMBER	58	418789	439801
DECEMBER	58	409 631	430339
	TOTAL	N/A	4551517

Is the Water Utility loca	ted in an ADWR Active Management Area (AMA)?
(~) Yes	() No
Does the Company have	e an ADWR Gallons Per Capita Per Day (GPCPD) requirement?
() Yes	(χ) No
If yes, provide the GPC	PD amount:
What is the level of arse (If more than one well, please	nic for each well on your systemmg/l list each separately.)

Note: If you are filing for more than one system, please provide separate data sheets for each system.

COMPANY NAME_	SUNAND	Water Co.	YEAR ENDING 12/31/2003		
PROPERTY TAXES					
Amount of actual prope	rty taxes paid dur	ring Calendar Year 2003	3 was: \$		
Attach to this annual reproperty tax payments)	port proof (e.g. proof any and all pro	roperty tax bills stamped operty taxes paid during	d "paid in full" or copies of cancelled checks for the calendar year.	r	
If no property taxes paid	d, explain why	Thortman	OS CASh Flow		
				-	
			•		
·.					

COMPANY NAME SUNDAND WA	tan Company	YEAR ENDING 12/31/2003			
INCOME TAXES					
For this reporting period, provide the following:					
Federal Taxable Income Reported Estimated or Actual Federal Tax Liability					
State Taxable Income Reported Estimated or Actual State Tax Liability		- -			
Amount of Grossed-Up Contributions/Advances:					
Amount of Contributions/Advances Amount of Gross-Up Tax Collected Total Grossed-Up Contributions/Advances					
Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.					
CERTIFICATION					
The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.					
SIGNATURE DATE					
PRINTED NAME	Account mant TITLE				
•,					

VERIFICATION AND SWORN STATEMENT **Intrastate Revenues Only**

RECEIVED

JUN 07 2004

			00	
VERIFICATION	COUNTY OF (COUNTY NAME	ME)	AZ CORPORATIO	NI COMMISSIO
STATE OF NEZONA	NAME (OWNER OR OFFIC	IAL) TITLE	DIRECTOR	OF UTILITIES
I, THE UNDERSIGNED	JARRA J		-DNN+AN+	\exists
OF THE	COMPANY NAME	D WATER	Ynagmo	
DO SAY THAT THIS ANNUAL	UTILITY REPORT	TO THE ARIZON	NA CORPORATION CO	<u>OMMISSION</u>
DO SAT THAT THIS AIRIONE	MONTH	DAY	YEAR	
FOR THE YEAR ENDING	12	31	2003	
HAS BEEN PREPAI PAPERS AND RECO THE SAME, AND STATEMENT OF B COVERED BY THIS SET FORTH, TO THE	PRDS OF SAID UT DECLARE THE USINESS AND A	TILITY; THAT SAME TO BE FFAIRS OF S. ECT TO EACH	A COMPLETE A AID UTILITY FOR AND EVERY MATI	AND CORRECT THE PERIOD TER AND THING
SWORN STATEMENT				•
IN ACCORDANCE V 401, ARIZONA REV OPERATING REVEI UTILITY OPERATIO	ISED STATUTES, NUE OF SAID UT	, IT IS HEREI ILITY DERIVE ENDAR YEAR 2	ED FROM ARIZON 2003 WAS:	A INTRASTATE
	Γ	Arizona Intrastate G	ross Operating Revenues Onl	y (\$)
		s	912	
	T	NCLUDES \$	IN BOX ABOVE リンス ES BILLED, OR COL	LECTED)
**REVENUE REPORTED ON THIS INCLUDE SALES TAXES BILLED COLLECTED. IF FOR ANY OTHIS THE REVENUE REPORTED ABOAGREE WITH TOTAL OPERATE ELSEWHERE REPORTED, ATTASTATEMENTS THAT RECONCIL DIFFERENCE. (EXPLAIN IN DET	OOR ER REASON, ER REASON, ER REVENUES ACH THOSE E THE AIL)	SIGNATURE OF OWNER OR OF STATE	SEFFICIAL 16-1005	
SUBSCRIBED AND SWORN TO I				
A NOTARY PUBLIC IN AND FOR		COUNTY NAME PZ	NA	
THIS Bul	DAY OF	MONTH	.20	
(SEAL)	o 7	SIGNATURE	OF NOTARY PUBLIC	
MY COMMUNICATION EXPLORES F. R.C.				
Notary Public Pinal Cou				

October 23, 2007



VERIFICATION AND SWORN STATEMENT RESIDENTIAL REVENUE

JUN 07 2004

AZ CORPORATION COMMISSIO DIRECTOR OF UTILITIES

VERIFICATION	<u>INTRASTATE R</u>	EVENUES ONL	Y	
STATE OF ARIZONA	COUNTY OF (COUNTY NAME)			
I, THE UNDERSIGNED	NAME (OWNER OR OFFICIAL)	2	TITLE ACCEDI	funtur
OF THE	COMPANY NAME SHAPE DATES COMPANY			
DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION				
FOR THE YEAR ENDING	MONTH DAY 12 31	YEAR 2003		
RECORDS OF SAID THE SAME TO BE A COUNTY FOR THE	ED UNDER MY DIRECT UTILITY; THAT I HAVE COMPLETE AND CORRE PERIOD COVERED BY G SET FORTH, TO TH	CAREFULLY I CT STATEMENT THIS REPOR	EXAMINED THE SAMI NT OF BUSINESS AND . T IN RESPECT TO EA	E, AND DECLARE AFFAIRS OF SAID ACH AND EVERY
SWORN STATEMENT				
ARIZONA REVISED REVENUE OF SAID	VITH THE REQUIREMI STATUTES, IT IS HE UTILITY DERIVED FRO SIDENTIAL CUSTOMER OPERATING REVENUES	CREIN REPOR OM <u>ARIZONA</u> S DURING CA (THE AM	TED THAT THE GR INTRASTATE UTILI	OSS OPERATING TY OPERATIONS AS:
s 6912 IN SALE			TAXES BILLED, OR CO	OLLECTED)
*RESIDENTIAL REVENU MUST INCLUDE SALES		AGE	SIGNATURE OF OWNER OR OFFICIAL Show the state of the sta	AL Z
SUBSCRIBED AND SWORN TO BEFORE ME NOTARY PUBLIC NAME				
A NOTARY PUBLIC IN AND FOR THE COUNTY OF			COUNTYNAME	
THIS	DA'	Y OF	MONTH	,20
(SEAL)		X	1500 C 16) V-e ₄
MY COMMISS	SION EXPIRES		SIGNATURE OF NOTARY P	UBLIE